MSSB-113 (12/17)

Fill in this in	formation to identify your case:		
Debtor 1	Wesley Dewayne Uthoff Jr		
	Full Name (First, Middle, Last)		
Debtor 2	Dahasaa Cilhard I Hhaff	_	
	Rebecca Gilbert Uthoff  Full Name (First, Middle, Last)		nis is an amended
(	,	· ·	list below the of the plan that have
United States	Bankruptcy Court for the: Southern District of Mississippi	been cha	
Case number (If known)			
, ,			
Chapte	er 13 Plan and Motions for Valuation and Lie	en Avoidai	nce 12/17
Dort 1.	Nations		
Part 1:	Notices		
To Debtors:	This form sets out options that may be appropriate in some cases, but the presence does not indicate that the option is appropriate in your circumstances or that it is pe district. Plans that do not comply with local rules and judicial rulings may not be con ALL secured and priority debts must be provided for in this plan.	rmissible in your ju	dicial
	In the following notice to creditors, you must check each box that applies.		
To Creditors:	Your rights may be affected by this plan. Your claim may be reduced, modified, or eli	iminated.	
	You should read this plan carefully and discuss it with your attorney if you have one in this have an attorney, you may wish to consult one.	bankruptcy case. If y	ou do not
	If you oppose the plan's treatment of your claim or any provision of this plan, you or objection to confirmation on or before the objection deadline announced in Part 9 of Bankruptcy Case (Official Form 309I). The Bankruptcy Court may confirm this plan w objection to confirmation is filed. See Bankruptcy Rule 3015.	the Notice of Chapt	er 13
	The plan does not allow claims. Creditors must file a proof of claim to be paid under any pla	an that may be confir	med.
	The following matters may be of particular importance. Debtors must check one box on e not the plan includes each of the following items. If an item is checked as "Not Incluchecked, the provision will be ineffective if set out later in the plan.		
	nit on the amount of a secured claim, set out in Section 3.2, which may result in a all payment or no payment at all to the secured creditor	✓ Included	☐ Not included
	dance of a judicial lien or nonpossessory, nonpurchase-money security interest, set n Section 3.4	☐ Included	✓ Not included
1.3 Non	standard provisions, set out in Part 8	☐ Included	✓ Not included
11		1	

Part 2	Plan Payments and Length of Plan
The pla	ngth of Plan.  In period shall be for a period of 60 months, not to be less than 36 months or less than 60 months for above median income debtor(s). If han 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors and in this plan.
2.2 Del	otor(s) will make regular payments to the trustee as follows:
	shall pay \$200.00 (monthly,semi-monthly, _/weekly, orbi-weekly) to the chapter 13 trustee. Unless otherwise ordered by irt, an Order directing payment shall be issued to the debtor's employer at the following address:
	Triangle Chemical Company 1485 Industrial Drive Bolton, MS 39041
	ebtor shall pay \$ ( _monthly, _semi-monthly, _weekly, or _bi-weekly ) to the chapter 13 trustee. Unless otherwise ordered court, an Order directing payment shall be issued to the joint debtor's employer at the following address:
2.3 Inc	ome tax returns/refunds.
Che	eck all that apply .
✓ [	Debtor(s) will retain any exempt income tax refunds received during the plan term.
	Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over o the trustee all non-exempt income tax refunds received during the plan term.
_	Debtor(s) will treat income tax refunds as follows:
-	
2.4 Ad	ditional payments.
Che	eck one.
✓ N	None. If "None" is checked, the rest of § 2.4 need not be completed or reproduced.
	Debtor(s) will make additional payment(s) to the trustee from other sources, as specified below. Describe the source, estimated amount, and date of each anticipated payment.
-	
Part 3	Treatment of Secured Claims
	rtgages. (Except mortgages to be crammed down under 11 U.S.C. § 1322(c)(2) and identified in § 3.2 herein.)
_	None. If "None" is checked, the rest of § 3.1 need not be completed or reproduced.
3.1(a)	✓ Principal Residence Mortgages: All long term secured debt which is to be maintained and cured under the plan pursuant to 11 U.S.C. §
	1322(b)(5) shall be scheduled below. Absent an objection by a party in interest, the plan will be amended consistent with the proof of claim filed by the mortgage creditor, subject to the start date for the continuing monthly mortgage payment proposed herein.

1	Mtg pmts to First Advantage Bank				
E	Beginning Feb 2019	<u>@</u> \$ <u>662.00</u>	✓ Plan ☐ Direct.	Includes escrow	/ ✓ Yes ☐ No
1	Mtg arrears to First Advantage Bank		Through <u>Jar</u>	2019	\$ 3,310.00
U	Non-Principal Residence Mortgages: All long term secured J.S.C. § 1322(b)(5) shall be scheduled below. Absent an object for claim filed by the mortgage creditor, subject to the start date	ection by a party in inte	erest, the plan will be	amended consist	ent with the pro
F	Property 1 address:				
N	Mtg pmts to				
E	Beginning @ \$		☐ Plan ☐ Direct.	Includes escrow	/ ☐ Yes ☐ No
F	Property 1: Mtg arrears to		Through		\$
	Mortgage claims to be paid in full over the plan term: Absorbith the proof of claim filed by the mortgage creditor.	ent an objection by a p	arty in interest, the p	lan will be amend	led consistent
C	Creditor:		Approx. amt. due	e:	Int. Rate*:
P	Property Address:				
F	Principal Balance to be paid with interest at the rate above:				
(;	as stated in Part 2 of the Mortgage Proof of Claim Attachmen	nt)			
P	Portion of claim to be paid without interest: \$				
	Equal to Total Debt less Principal Balance)				
S	Special claim for taxes/insurance: \$	/month, beginnin	9		
(6	as stated in Part 4 of the Mortgage Proof of Claim Attachmen	nt)			
*	Unless otherwise ordered by the court, the interest rate shall	be the current Till rate	in this District.		
li	nsert additional claims as needed.				

3.2 Motion f	or valuation of security, pay	yment of fully secured clain	ns, and modification	n of undersecured cla	ims. Check one.	
☐ None.	If "None" is checked, the res	t of § 3.2 need not be comple	ted or reproduced.			
The re	emainder of this paragraph	will be effective only if the	applicable box in Pa	art 1 of this plan is che	ecked.	
distrib forth b	ant to Bankruptcy Rule 3012, uted to holders of secured cla elow or any value set forth in of the Notice of Chapter 13 E	the proof of claim. Any object	s) the court to value to ction to valuation sha	he collateral described	below at the lesser	of any value set
the an	ortion of any allowed claim the nount of a creditor's secured of ured claim under Part 5 of this controls over any contrary are	claim is listed below as havinç s plan. Unless otherwise orde	g no value, the creditered by the court, the	or's allowed claim will b	e treated in its entir	ety as an
	Name of creditor	Estimated amount of creditor's total claim #	Collateral	Value of collateral	Amount of secured claim	Interest rate*
<u>(</u>	Capital One Auto	8,000.00	2008 Expedition	3,900.00	3,900.00	6.75
Insert a	additional claims as needed.					
#For m	nobile homes and real estate	identified in § 3.2: Special Cla	aim for taxes/insurand	ce:		
	Name of credito	or	Collateral	Amount per month	Begir	nning
For vel	s otherwise ordered by the conticles identified in § 3.2: The claims excluded from 11 Uppe.	current mileage is	the current <i>Till</i> rate in	n this District.		
✓ None.	If "None" is checked, the res	t of § 3.3 need not be comple	ted or reproduced.			
— (1) ir	aims listed below were either: ncurred within 910 days befor ersonal use of the debtor(s),	e the petition date and secure	ed by a purchase mo	ney security interest in	a motor vehicle acc	juired for the
(2) ir	ncurred within 1 year of the pe	etition date and secured by a	purchase money sec	curity interest in any oth	er thing of value.	
stated	claims will be paid in full und on a proof of claim filed befo ce of a contrary timely filed p	re the filing deadline under Ba	ankruptcy Rule 3002	(c) controls over any co	ed by the court, the ntrary amount listed	claim amount below. In the
	Name of cr	reditor	Colla	ateral	Amount of clai	m Interest rate*
-						
*Unles	s otherwise ordered by the co	ourt, the interest rate shall be	the current Till rate in	n this District.		
Insert a	additional claims as needed.					

	to avoid lien pursuar	nt to 11 U.S.C. § 522.				
Check o	one.					
	•	the rest of § 3.4 need not be				
	_	agraph will be effective only		_		
debto claim an ol herel the e	or(s) would have been on listed below will be avection on or before the by move(s) the court to extent allowed. The amount of the court allowed.	sessory, nonpurchase money entitled under 11 U.S.C. § 522 roided to the extent that it impare objection deadline announce find the amount of the judicial bunt, if any, of the judicial lien and Bankruptcy Rule 4003(c)	2(b). Unless otherwise airs such exemptions ed in Part 9 of the Not I lien or security intere or security interest that	e ordered by the cour upon entry of the ord tice of Chapter 13 Ba est that is avoided will at is not avoided will	t, a judicial lien or s er confirming the p nkruptcy Case (Of l be treated as an u be paid in full as a	ecurity interest securing a lan unless the creditor files ficial Form 309I). Debtor(s unsecured claim in Part 5 to secured claim under the
	Name of creditor	Property subject to lien	Lien amount to be avoided	Secured amount remaining	Type of lien	Lien identification (county, court, judgment date, date of lien recording, county, court, book and page number)
	t additional claims as n der of collateral.	eeded.				
_		4 (5005 4 4		,		
The c	debtor(s) elect to surrer	the rest of § 3.5 need not be ander to each creditor listed belt stay under 11 U.S.C. § 362(ansecured claim resulting from	low the collateral that a) be terminated as to	secures the creditor's the collateral only an	d that the stay und	er § 1301 be terminated in
		Name of creditor			Collateral	
Inser	t additional claims as n	eeded.				
Part 4:	Treatment of F	Fees and Priority Claims				
		priority claims, including dome	estic support obligatio	ns other than those t	reated in § 4.5, will	be paid in full without
	-1- f					

## 4.2 Trustee's fees

Trustee's fees are governed by statute and may change during the course of the case.

4.3 Attorney's fees			
✓ No look fee: \$ 3,400.00	·		
Total attorney fee charged:	\$ 3,400.00		
Attorney fee previously paid:	\$ 0.00		
Attorney fee to be paid in plan	# O 400 00		
per confirmation order:	\$ 3,400.00	·	
Hourly fee: \$	. (Subject to approval	of Fee Application.)	
4.4 Priority claims other than attor	ney's fees and those treated in § 4.5.		
Check one.	•		
None. If "None" is checked, the	e rest of § 4.4 need not be completed or re	produced.	
✓ Internal Revenue Service	\$ 10.00	·	
✓ Mississippi Dept. of Revenue §	\$ 10.00		
Other		_	
\$			
4.5 Domestic support obligations.			
	e rest of § 4.5 need not be completed or re	produced.	
DUE TO: Adrien Pamer c/o DH	S Jackson, MS		
POST PETITION OBLIGA	ATION: In the amount of \$ 200.00	per month beginning Current	
	through payroll deduction, or  through th		
	3	•	
PRE-PETITION ARREAR	AGE: In the total amount of \$ 1,500.00	through current	which shall be paid
in full over the plan term, t	unless stated otherwise:		
To be paid ☐ direct, ✓	through payroll deduction, or $\  \  \  \  \  \  \  \  \  \  \  \  \ $	he plan.	
Insert additional claims as need	ded.		
Part 5: Treatment of No	npriority Unsecured Claims		
rait 5. Treatment of Nor			
5.1 Nonpriority unsecured claims r Allowed nonpriority unsecured cla the largest payment will be effecti	aims that are not separately classified will be	pe paid, pro rata. If more than one option is check	ed, the option providing
3 , ,	ve. Спеск ан тат арру.		
✓ The sum of \$ 0.00	·		
0 % of the total amo	ount of these claims, an estimated paymen	it of \$ <u>0.00</u>	
☐ The funds remaining after disbu	ursements have been made to all other cre	editors provided for in this plan.	
If the estate of the debtor(s) we	re liquidated under chapter 7, nonpriority ι	unsecured claims would be paid approximately \$ 0	0.00
* *		ity uneccured claims will be made in at least this	·

_		f § 5.2 need not be completed or ims listed below are separately		vill be treated as follows	
	Name of creditor	Basis for se classification an	eparate	Approximate amount owed	Proposed treatment
Part 6:	Executory Contracts a	nd Unexpired Leases	-		
and unexpi	ired leases are rejected. Ch "None" is checked, the rest of ditems. Current installment p	f § 6.1 need not be completed o payments will be disbursed either	<i>r reproduced.</i> er by the trustee	e or directly by the debtor(s)	
trustee re	Name of creditor	Description of leased property or executory contract	Current installme paymen	ent arrearage to be	Treatment of arrearage
		_	_ \$	<b></b> \$	
			Disbursed by	<i>/</i> :	
			☐ Trustee		
			☐ Debtor(s)	)	
Insert ad	dditional claims as needed.				
Part 7:	Vesting of Property of	the Estate			
'.1 Property of	f the estate will vest in the o	debtor(s) upon entry of discha	arge.		
Part 8:	Nonstandard Plan Prov	risions			
3.1 Check "No	ne" or List Nonstandard Pla	an Provisions			
	"None" is checked, the rest o	f Part 8 need not be completed	or reproduced.		
✓ None. If	toy Bula 2015/a) nanatandar	d provisions must be set forth be	elow. A nonstar		on not otherwise included in the
Inder Bankrupt		rd provisions set out elsewhere	in this plan are	іпетестіче.	

Part 9:

Signature(s):

## 9.1 Signatures of Debtor(s) and Debtor(s)' Attorney

The Debtor(s) and attorney for the Debtor(s), if any, must sign below. If the Debtor(s) do not have an attorney, the Debtor(s) must provide their complete address and telephone number.

	wayne Uthoff	JI		🗶 /s/ Rebecca (	Jibert Utnoff	
Signature of D	ebtor 1			Signature of	Debtor 2	
Executed on	12/31/2018			Executed on	12/31/2018	
	MM / DD	/ YYYY			MM / DD /YYYY	_
	Big Mound F	Rd	<u></u>		e Big Mound Rd	
Address Li	ne 1			Address	Line 1	
Address Li	ne 2		_	Address	Line 2	
Bentonia,	MS 39040			Bentonia	a, MS 39040	
	, and Zip Code		_	City, Stat	e, and Zip Code	
Telephone	Number		_	Telephor	e Number	
/s/ Frank H Co	xwell ttorney for De	ebtor(s)	Dat		NAMAY.	
Signature of A	ttorney for De	. ,	Dat	te <u>12/31/2018</u> MM / DD /	YYYY	
Signature of A	ttorney for De	. ,	Dai		YYYY	
Signature of A	ttorney for De	. ,	Dat		YYYY	
Signature of A	ttorney for De eland Drive # ne 1	. ,	Dat		YYYY	
Signature of A  1675 Lak  Address Li  Address Li	eland Drive # ne 1	. ,	Dat		YYYY	
Signature of A  1675 Lak Address Li  Address Li  Jackson,	ttorney for De eland Drive # ne 1	. ,	Dat		YYYY	
Address Li  Address Li  Jackson, City, State.	eland Drive # ne 1  ne 2  MS 39216 , and Zip Code	. ,	Dat		YYYY	
Address Li  Jackson, City, State	eland Drive # ne 1  ne 2  MS 39216 , and Zip Code	:102	Da		YYYY	
Address Li  Jackson, City, State. 601-948-4	eland Drive # ne 1  ne 2  MS 39216 , and Zip Code	7781 MS Bar Number	Dat		YYYY	